## BEST AVAILABLE COP

Effective October 1, 2000

Application or Docket Number	
Application or Docket Number	>

. CLAIMS AS FILED - PART I (Column 1)			-	mn 2)		SMALL ENTITY TYPE			OTHER			
TOTAL CLAIMS			20		·			RATE	FEE	OR ]	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2() minus 20=		.0			X\$ 9=		OR	X\$18≃	
INDEPENDENT CLAIMS			// minus 3 =		•			X40=	·,	OR	X80=	1
MULTIPLE DEPENDENT CLAIM PRESENT								+135%		1		80.80
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL	<u> </u>	OR	+270= TOTAL	
CLAIMS AS AMENDED -				) - PAR	TII			IOIAL		OR	OTHER	} 90.00 Than
(Column 1) (Column 1)					mn 2)	(Column 3)	<u>,</u>	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total _	• 31.	Minus	• 6	0.	=		· X\$ 9=		OR	X\$18=	198
AME	Independent	. 9	Minus	•••	4	= 5		X40=		OR	X80=	430
<b>L</b>	PINST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	CLAIM			+135=		OR	+270=	
				. • .		·	`**	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	678
_	· , · · · ·	(Column 1)	. 1	(Colui		(Column 3)	ι.					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	╛	X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MU	Minus	***	CL AIM	]=	Į Į	X40=		OR	X80=	-
_	rino i rincoc	NIATION OF MO	JETIPLE DEF	ENDEN	CLAIM		┚┃	+135=		OR	+270=	
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colur		(Column 3)	<u> </u>					
· AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL : FEE		RATE	ADDI- TIONAL FEE
NON N	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***	F 01	-	<b> </b>	X40=		OR	X80=	
ــــــــــــــــــــــــــــــــــــــ	FIRST PRESE	NTATION OF MI	JUITPLE DE	PENDENI	CLAIM		┚┢	+135=			+270=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE												
	The "Highest Number Previously Paid For" (NTHIS SPACE is less than 3, enter "3."  ADDIT. FEE											